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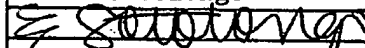
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Erin Sotolongo

(Depositor's name)



(Signature)

8/16/2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/63-4,682	08/05/2003	Bart De Corte	JAB 1425 CON1	7134

TITLE OF INVENTION: HIV REPLICATION INHIBITING PYRIMIDINES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	11/10/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
BALASUBRAMANIAN, VENKATARAMAN	1624	514-272000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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Laura Donnelly

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Janssen Pharmaceutica, N.V.

BELGIUM

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date 8/16/2005

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